F160000002057

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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03/07/16--01014--025 **70.00

FILLED

16 MAY -2 MI 9:5

SECRETARY OF STATE

3/30/2016

The following letter is being submitted for purposes of Application by Foreign Corporation for Authorization to Transact Business in Florida

Refer to Ref. Number: W16000017248:

- SelectSolutions Insurance Services LLC (A foreign LLC in this state) was converted to SelectSolutions Insurance Services Inc. in its jurisdiction state of Delaware as of 12/17/15
- 2) The former name of the Limited Liability Company was SelectSolutions Insurance Services, LLC.
- 3) 100% of the managers unanimously voted for the conversion.
- 4) The Principals who are listed below are the same in both entities:

John R. Prichard Jr.

Leticia Trevino

John S. Simpson

If you have any questions please contact:

Joki Kale

1350 Carlback Ave #300

Walnut Creek CA 94596

925-295-2524

John R. Prichard Jr.

Manager of SelectSolutions Insurance Services LLC

FLORIDA DEPARTMENT OF STATE Division of Corporations

April 14, 2016

JOKIE KALE 1350 CARLBACK AVE, SUITE 300 WALNUT CREEK, CA 94596

SUBJECT: SELECTSOLUTIONS INSURANCE SERVICES, INC.

Ref. Number: W16000017248

Sevicinal -2 AM 8: 28

 T_i

We have received your document for SELECTSOLUTIONS INSURANCE SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$950.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 516A00004735

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COVER LETTER

_	stration Sectionsion of Corpor								
SUBJECT:	•	ns Insurance Servi	ces, Inc.						
SUBJECT.		Name of	corporation	- must i	nclude suffix				_
Dear Sir or M	fadam:								
"Certificate of	of Existence,"	by Foreign Corp or "Certificate of orporation to tran	Good Stan	ding" ar	nd check are sub				
Please return Joki Kale	all correspond	dence concerning	this matter	to the fo	ollowing:				
			Name of I	Person					
SelectSolution	is Insurance Ser	vices, Inc.					[_	
1350 Carlback	: Ave, Suite 300)	Firm/Com	pany			ALCRET	6 NAY	_ _
Walnut Creek,	, CA 94596		Addre	SS			25 S	-2 M	
jokik@heffgro	oup.com	(City/State ar	nd Zip c	ode		MALS.	9 5	
		E-mail address: (to be used f	or futur	e annual report	notification	1)	-	_
For further in	formation cor	cerning this matt	ter, please c	all:	•				
Joki Kale		at	925	295-2	2524				
Nam	e of Person	at	Area Code	_ <i>)</i> ;	Daytime Telep	hone Num	ber		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclosed is a	check for the	following amour	nt:		,	,			
■ \$70.00 Fi	ling Fee 🗆	\$78.75 Filing F Certificate of S			Filing Fee & ed Copy		50 Filing ificate of ified Co	f Stat	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(If name unavail	able in Florida, enter alternate corporate nan	ne adopted for the purpose of transacting business in 46-1474099	Florida)				
2	y under the law of which it is incorporated)	(FEI number, if applicable)					
12/17/2015	,	N/A					
(Date	of incorporation)	(Date of duration, if other than perpetual)					
5			· · · · · · · · · · · · · · · · · · ·				
1350 Carlback A		s in Florida, if prior to registration) .1502, F.S., to determine penalty liability)	a				
· <u> </u>	(Prin	cipal office address)					
	(Current ma	iling address, if different)					
3. Name and stree	et address of Florida registered agent: (1	P.O. Box NOT acceptable)	, c				
Name:	Corporation Service Company		55				
Office Address:	1201 Hays Street						
	Tallahassee	32301-2525 , Florida					
	(City)	(Zip code)					
Penistered and	application, I hereby accept the appoin	rvice of process for the above stated corporati ntment as registered agent and agree to act in s relative to the proper and complete perform s of my)position as registered agent.	this capacity				

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS John S. Simpson Chairman: 1350 Carlback Ave., Suite 100 Address: Walnut Creek, CA 94596 Francis M. Heffernan Vice Chairman: 1350 Carlback Ave., Suite 100 Address: Walnut Creek, CA 94596 John R. Prichard Jr. Director: 1350 Carlback Ave., Suite 100 Address: Walnut Creek, CA 94596 Director: **B. OFFICERS** John R. Prichard Jr. President: 1350 Carlback Ave., Suite 100 Address: Walnut Creek, CA 94596 John S. Simpson Vice President: 1350 Carlback Ave., Suite 100 Address: Walnut Creek, CA 94596 Leticia Trevino Secretary: 1350 Carlback Ave., Suite 100, Walnut Creek, CA 94596 Address: Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

John R. Prichard Jr. DP

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SELECTSOLUTIONS INSURANCE SERVICES,

INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE

AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR

AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF

FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SELECTSOLUTIONS INSURANCE SERVICES, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

SECRETARY OF STATE

Authentication: 201881534

Date: 02-24-16

5213602 8300 SR# 20161110805